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4/13/2012

Family For Good Government Federal PAC One Towne Square, Suite 1913 Southfield MI 48076

Federal Election Commission 999 E Street, N.W. Washington D.C. 20463

Please find the following items enclosed:

1 original of the FEC Form 3X for 1/01/12-3/31/12 1 copy of the FEC Form 3X for 1/01/12-3/31/12

Thank you.

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

RECEIVED

2012 APR 16 AM 10: 24

FEC FORM 3X

Rev. 12/2004

1.	NAME OF COMMITTEE (in full)	TYPE OR PE	IINT ▼	Example: If ty over the lines.	ping, type	12FE4M5		
E.	a ₁ m ₁ i ₁ l ₁ y ₁ F ₁ o ₁ r ₁	<u> </u>	G o v e	rınımıeınıt	__ F e d e	r _l a,I, _I P _I A _I	<u>C </u>	
ADE	DRESS (number and street)	O n e	Tiolwinie	_I S _I q _I u _I a _I r	e,, Su	i _l t _l e _{l l} 1 _l 9 _l	1,3, , ,	ш.
.[Check if different than previously reported. (ACC)	S o u t	h, f, i, e, l,	d _{1 1 1 1}		M ₁ 1 4,8	0,7,6]-[
2.	FEC IDENTIFICATION N	JMBER ▼	CITY	A	s	TATE ▲·	ZIP CODE	<u> </u>
	C 0 0 4 3 0 9	2 ັ 6	3. IS	THIS N	NEW (N) OR	AMENDE (A)	:D	
4.	TYPE OF REPORT (Choose One) (a) Quarterly Reports:	(b) Month Repor	on: Mar 2	0 (M2) [] 0 (M3) [] 0 (M4) []	May 20 (M5) Jun 20 (M6) Jul 20 (M7)	Aug 20 (M Sep 20 (M Oct 20 (M1	9) (Nor Year Year Year	v 20 (M11) n-Election r Only) c 20 (M12) n-Election r Only)
	April 15 Quarterly Report (0 July 15 Quarterly Report (0 October 15 Quarterly Report (0	(C) 1	2-Day PRE-Election Report for the:	Primary (1		General (12G) Special (12S)	Rur	noff (12R)
	January 31 Year-End Report (Election	on Mark	١٠٥١	**************************************	in the State of	
	July 31 Mid-Year Report (Non-electic Year Only) (MY)	⁾ⁿ `` ı	00-Day POST-Election Report for the:	General (3	0G)	Runoff (30R)	Spe	ecial (30S)
	Termination Report (TER)		Election	on Mym	· [· [in the State of	
5.	Covering Period	1 0 1	2 0 1 2	2 through		(31)	0,1,2	
	ertify that I have examined the or Print Name of Treasure	-		_	d belief it is true	e, correct and com	plete.	
Signature of Treasurer Date Date Date								
NOTE: Submission of false, exroneous. or incorreplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.								

FE6AN026

Office

Use

Only

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS FEC Form 3X (Rev. 02/2003) Page 2 Write or Type Committee Name Family For Good Government Federal PAC Report Covering the Period: To: From: **COLUMN A** COLUMN B This Period Calendar Year-to-Date Cash on Hand (a) January 1, (b) Cash on Hand at Beginning of Reporting Period..... 0 0 0 0 0 0 Total Receipts (from Line 19) (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 3 8 3 8 6 6(a) and 6(c) for Column B)..... Total Disbursements (from Line 31)...... 8. Cash on Hand at Close of Reporting Period 6 2 8 7 3 2 8 7 3 3 (subtract Line 7 from Line 6(d))..... Debts and Obligations Owed TO the Committee (Itemize all on 0 0 0 Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission 999 E Street, NW Washington, DC 20463

> Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

Page 3

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

Family For Good Government Federal PAC 0 3 797 3 1 2 0 1 2 2_0_1_ Report Covering the Period: From: To: **COLUMN B COLUMN A** I. Receipts **Total This Period** Calendar Year-to-Date 11. Contributions (other than loans) From: (a) Individuals/Persons Other Than Political Committees 0 0 0 0 0 0 (i) Itemized (use Schedule A)..... 0 0 (ii) Unitemized (iii) TOTAL (add 0 0 0 Lines 11(a)(i) and (ii).....▶ 0 0 0 0 0 (b) Political Party Committees (c) Other Political Committees 0 0 0 0 0 0 (such as PACs)..... (d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry 0 0 0 0 0 0 Totale to Line 33, page 5) 12. Transfers From Affiliated/Other 0 0 0 0 0 0 Party Committees..... 0 0 0 0 0 13. All Loans Received..... 0 0 0 0 0 0 14. Loan Repayments Received..... 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) 0 0 0 0 0 0 (Carry Totals to Line 37, page 5)..... 16. Refunds of Contributions Made to Federal Candidates and Other 0 0 0 Political Committees..... 17. Other Federal Receipts 0 0 0 (Dividends, Interest, etc.)..... 18. Transfers from Non-Federal and Levin Funds (a) Non-Federal Account 0 0 0 0 0 0 (from Schedule H3)..... 0 0 0 0 0 0 (b) Levin Funds (from Schedule H5) (c) Total Transfers (add 18(a) and 18(b)).. 0 0 0 19. Total Receipts (add Lines 11(d), 0 0 0 12, 13, 14, 15, 16, 17, and 18(c)).......▶ 20. Total Federal Receipts 0 0 0 0 0 0 (subtract Line 18(c) from Line 19) ▶

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003) Page 4 **COLUMN A** COLUMN B II. Disbursements Calendar Year-to-Date **Total This Period** 21. Operating Expenditures: (a) Allocated Federal/Non-Federal Activity (from Schedule H4) 0 0 0 0 0 0 (i) Federal Share 0 0 0 0 0 (ii) Non-Federal Share..... (b) Other Federal Operating 6 5 3 9 9 6 5 3 Expenditures (c) Total Operating Expenditures 6 5 (add 21(a)(i), (a)(ii), and (b)) ▶ 22. Transfers to Affiliated/Other Party 0 0 0 0 Committees...... Contributions to Federal Candidates/Committees and Other Political Committees. 1 0 0 0 0 0 0 0 0 24. Independent Expenditures 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 26. Loan Repayments Made..... 0 0 0 0 0 Loans Made......Refunds of Contributions To:
(a) Individuals/Persons Other 0 0 0 0 0 0 Than Political Committees 0 0 0 0 0 (b) Political Party Committees (c) Other Political Committees (such as PACs)..... (d) Total Contribution Refunds 0 0 0 0 0 0 (add Lines 28(a), (b), and (c))........... ▶ 0 1 0 0 0 0 1 0 0 0 29. Other Disbursements 30. Federal Election Activity (2 U.S.C. §431(20)) (a) Allocated Federal Election Activity (from Schedule H6) 0 0 0 0 0 (i) Federal Share 0 0 0 0 0 (ii) "Levin" Share..... (b) Federal Election Activity Pald Entirely 0 0 0 0 0 With Federal Funds (c) Total Federal Election Activity (add ... 0 0 0 0 0 Lines 30(a)(i), 30(a)(ii) and 30(b)).... ▶ 31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)).. 2 0 9 6 5 3 0 9 6 5 3

2 0 9 6

3

2 0

32. Total Federal Disbursements

(subtract Line 21(a)(ii) and Line 30(a)(ii)

from Line 31).....

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003) Page 5 COLUMN A COLUMN B III. Net Contributions/Operating Ex-**Total This Period** Calendar Year-to-Date penditures 33. Total Contributions (other than loans) 0 0 0 0 0 (from Line 11(d), page 3) 34. Total Contribution Refunds (from Line 28(d))..... 35. Net Contributions (other than loans) 0 0 0 0 (subtract Line 34 from Line 33) 36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶ 37. Offsets to Operating Expenditures 0 0 0 0 (from Line 15, page 3)..... 38. Net Operating Expenditures 6 5 (subtract Line 37 from Line 36)

SCHEDULE B (FEC Form 3X)

SCHEDULE B (FEC FOIII 3A)	Use separate schedule(s)	FOR LINE			
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only 21b 27	one) 22 23 24 25 26 28a 28b 28c 29 30b		
Any information copied from such Reports and Staten or for commercial purposes, other than using the name	on for the purpose of soliciting contributions				
NAME OF COMMITTEE (In Full)					
angle Family For Good Goverr	nment Federal I	PAC			
Full Name (Last, First, Middle Initial)			Date of Disbursement		
A.					
Mailing Address			[MJM] \ [BJQ] \ [AJAAAAA		
City	State Zip Code				
Purpose of Disbursement			Amount of Each Disbursement this Period		
Candidate Name		Category/ Type			
Office Sought: House Disburser Senate	nent For: Primary General				
President	Other (specify)	1			
State: District:		·			
Full Name (Last, First, Middle Initial) B.			Date of Disbursement		
Mailing Address			MAN, LEAB, LALAAAA		
City	State Zip Code				
Purpose of Disbursement	urpose of Disbursement				
Candidate Name		Category/ Type	Amount of Each Disbursement this Period		
Office Sought: House Disburser Senate President	nent For: Primary General Other (specify)				
State: District:					
Full Name (Last, First, Middle Initial)	Full Name (Last, First, Middle Initial)				
			Date of Disbursement		
Mailing Address					
City	State Zip Code	·			
Purpose of Disbursement			Amount of Each Disbursement this Period		
Туре		Category/ Type			
Office Sought: House Disburser Senate President State: District:	ment For: Primary ☐ General Other (specify) ▼				
SUBTOTAL of Disbursements This Page (optional)					
TOTAL This Period (last page this line number only)					
		-			

SCHEDULE	В	(FEC	Form	3X)
ITEMIZED D	ISF	RURSE	MENT	S

SCHEDULE B (PEC FORM 3X)	Use separate schedule(s)	FOR LINE I					
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b	22 X 23 24 25 26				
Any information copied from such Departs and Statement	······································	27	28a 28b 28c 29 30b				
or for commercial purposes, other than using the nam	Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.						
NAME OF COMMITTEE (In Full) Family For Good Govern	ment Federal	PAC					
Full Name (Last, First, Middle Initial)							
^{A.} Berg For Senate		-	Date of Disbursement				
Mailing Address P.O. Box 9394							
' Eorgo	State Zip Code ND 58106						
Purpose of Disbursement			Amount of Each District and the Built				
Contribution Candidate Name		0,1 1	Amount of Each Disbursement this Period				
Richard A. Berg	C00496703	Category/ Type	1,000,00				
	ent For: Primary ☐ General Other (specify) ▼						
State: ND District:	2012						
Full Name (Last, First, Middle Initial) B.	Full Name (Last, First, Middle Initial)						
Mailing Address	 		MANN , LOAD , LALANAA				
City							
Purpose of Disburgement			Amount of English Dishuraneset this Desired				
Candidate Name	·	Category/ Type	Amount of Each Disbursement this Period				
Office Sought: House Disbursem							
I I I	Primary General Other (specify) ▼						
State: District:							
Full Name (Last, First, Middle Initial) C. Date of Disbursement							
C.							
Mailing Address			MAN , LORD , LANARATA				
City							
Purpose of Disbursement		Amount of Each Disbursement this Period					
Candidate Name		Category/ Type	Amount of Each Disbursement this Period				
	nent For: Primary ☐ General Other (specify) ▼						
SUBTOTAL of Disbursements This Page (optional)							
TOTAL This Period (last page this line number only)							

SCHEDULE B	(FEC	Form	3X)
ITEMIZED DISI	BURSE	MENT	S

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SCHEDOLE B (FEC FORM SA)	Use separate schedule(s)	FOR LINE I				
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only	22 23 24 25 26			
	_ 	27	28a 28b 28c 29 30b			
Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.						
NAME OF COMMITTEE (In Full)						
angle Family For Good Govern	ment Federal	PAC				
Full Name (Last, First, Middle Initial)			Date of Disbursement			
^{A.} BOMA c/o CRE Advocac _y	BOMA c/o CRE Advocacy Fund					
Mailing Address 38800 Country Club Drive	-					
' Earmington Hillo	State Zip Code MI 48331					
Purpose of Disbursement			1			
Contribution Candidate Name		0 1 1	Amount of Each Disbursement this Period			
		Category/ Type	7 0 0 0 0			
Office Sought: House Disbursen			•			
	Primary General Other (specify) ▼					
State: District:	• • • •					
Full Name (Last, First, Middle Initial)			Date of Disbursement			
^{B.} BOMA Michigan PAC			0 3 1 6 2 0 1 2			
Mailing Address 38800 Country Club Drive						
' Earmington Hille	State Zip Code MI 48331					
Purpose of Disbursement			Amount of Foot Pictures 1991 Foot			
Contribution Candidate Name		0 1 1	Amount of Each Disbursement this Period			
		Category/ Type	3 0 0 0 0			
Office Sought: House Disbursem		-				
├ ├	Primary ☐ General Other (specify) ▼					
State: District:	• • • • •					
Full Name (Last, First, Middle Initial) C. Date of Disbursement						
Mailing Address			[MAN] \ [DAB] \ [AAAAAA]			
City						
Purpose of Disbursement		Amount of Each Diphyracmont this Beriad				
Candidate Name		Category/	Amount of Each Disbursement this Period			
Office Sought: House Disbursen	nent For:	Type				
Senate	Primary General					
State: District:	Other (specify) ▼					
SUBTOTAL of Disbursements This Page (optional).						
TOTAL This Period (last page this line number only)						

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